

PUBLIC PROTECTION CABINET

Department of Housing, Buildings and Construction Division of HVAC

> 101 Sea Hero Road, Suite 100 Frankfort, Kentucky 40601-5412 Phone: 502-573-0395, Fax: 502-573-1401 www.dhbc.ky.gov

Consumer Complaint No:	
Date Received:	

FORMAL CONSUMER COMPLAINT

Site of Complaint Street or Road	City		County
Owner(s) Name	•	Iome Phone #	-
Address			
Street or PO Box	City	County	Zip
Company Name			
Company Owner(s) Name	Master License #		
Address			
Street or PO Box	City	County	Zip
Company Phone#	Date of Installation		
Check all that apply below. HVAC person not licensed. Incompetence, deliberate disregard, o Faulty installation, maintenance, alter			plicable codes.
Heating system Cooling System	Yentilation		
There is currently ongoing court lit		atter in	County.
I understand and agree that I may be subp Board as a result of this formal consumer	• •	if a hearing is held l	pefore the HVAC
Owner(s) Signature		Date	
		И	VAC 17 (06-15)



HVAC VIOLATION OR DEFICIENCY

(ADDITIONAL PAGES MAY BE USED IF NEEDED)

Explain in detail, starting with the date on which issues were first discovered, all issues with the HVAC System:			
Please include	your expectations as to how this matter should be resolved:		

